FORM D

SEC Mail Processing Section UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

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**THOMSON REUTERS** 

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

· · · · · ·					
OMB APPROVAL					
OMB Number:	3235-0076				
Expires:					
Estimated averag	e burden				
haura nor roomana	16.00				

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Prefix		Serial
DA	TE RECEIV	ED
		)

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)	
CSA Pope Asset Fund I, LLC, \$12,000,000 Offering of 480 Limited Liability Company Units	S
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6	ULOE
Type of Filing:	111 (111 ) 111 (111 ) 111 (111 ) 111 (111 ) 111 (111 ) 111 (111 ) 111 (111 ) 111 (111 ) 111 (111 ) 111 (111 )
A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer	08056241
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	08030241
CSA Pope Asset Fund I, LLC	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Two Metroplex Drive, Suite 111, Birmingham, Alabama 35209	(205) 263-2332
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	
Investment Fund	
	(please specify):
Month Year  Actual or Estimated Date of Incorporation or Organization: 06 08 Actual Est  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	imated de:
CN for Canada; FN for other foreign jurisdiction)	DE

## **GENERAL INSTRUCTIONS**

## Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

# ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

A. BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
<ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or to</li> </ul>	more of a class of equity securities of the issuer.
<ul> <li>Each executive officer and director of corporate issuers and of corporate general and managing parti</li> </ul>	ners of partnership issuers; and
• Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	General and/or Managing Partner
Full Name (Last name first, if individual)	
Capital Strategies Advisors, Inc.	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Two Metroplex Drive, Suite 111, Birmingham, AL 35209	
Check Box(es) that Apply: Promoter Beneficial Owner 📝 Executive Officer 📋 Dire	General and/or Managing Partner
Full Name (Last name first, if individual)	
Twiford, J. Rainer	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Fwo Metroplex Drive, Suite 111, Birmingham, AL 35209	
Check Box(es) that Apply: Promoter Beneficial Owner 🛮 Executive Officer 📗 Dire	Cector General and/or Managing Partner
Full Name (Last name first, if individual) Gieger, Hollis	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Two Metroplex Drive, Suite 111, Birmingham, AL 35209	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	ctor General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Dire	General and/or Managing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as nec	cessary)

					B. II	NFORMATI	ION ABOÙ	T OFFERI	NG			* 4	
1.	Has the	issuer solo	i, or does th			II, to non-a						Yes	No <b>X</b>
2.	What is	the minim	um investm									s_50,	000.00
												Yes	No
3.		_	permit joint								irectly, any	R	
4.	commis If a pers	sion or sim on to be lis s, list the na	ilar remune sted is an ass	ration for s sociated pe roker or de	solicitation erson or age ealer. If mo	of purchase ent of a brok ore than five	ers in conne ter or deale e (5) persor	ection with r registered is to be list	sales of sec I with the S ed are asso	curities in t SEC and/or	he offering. with a state cons of such		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Ful	ll Name (	Last name	first, if indi	ividual)									
Bu	siness or	Residence	Address (N	lumber and	d Street, C	ity, State, Z	Lip Code)	<u></u>					
Nai	me of As	sociated Br	roker or De	aler		<del></del>							
	3C Secur											<del></del>	
Sta			Listed Has										1.04-4
	(Check	"All State:	s" or check	individual	! States)		***************************************					∐ Аі	1 States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH	CA KY NJ TX	LA NM UT	ME NY VT	MD NC VA	MA ND WA	MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR
Ful	l Name (	Last name	first, if indi	ividual)				- V-E	4 44.				-
Bus	siness or	Residence	: Address (1	vumber an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated Ba	roker or De	aler									
Sta	tes in Wh	nich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State:	s" or check	individual	l States)				****	****************	***************************************	☐ Al	l States
	AL IL MT RI	AK IN NE SC	IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (	Last name	first, if ind	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)						
Nai	me of As	sociated Bi	roker or De	aler					·····				
Sta	tes in Wh	ich Persor	Listed Has	Solicited	or Intends	to Solicit	Purchasers						
			s" or check							***************************************		□ Al	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and		
	Type of Security	Aggregate Offering Price	Amount Already Sold
		0.00	\$ 0.00
			\$ 0.00
	Equity		\$_0.00
	☐ Common ☐ Preferred	0.00	0.00
	Convertible Securities (including warrants)	0.00	\$ \$ 0.00
	Partnership Interests		
	Other (Specify LLC Units	12,000,000.00	\$_0.00
	Total	12,000,000.00	\$_0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	43	\$ 12,000,000.00
	Non-accredited Investors		\$_0.00
	Total (for filings under Rule 504 only)		\$_0.00
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	m	Type of	Dollar Amount
	Type of Offering	Security	Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_20,000.00
	Accounting Fees		\$
	Engineering Fees	<del>-</del>	\$
	Sales Commissions (specify finders' fees separately)	<del>-</del>	\$
	Other Expenses (identify)	_	s
	Total		\$ 20,000.00

L	C. OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE OF FI		
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a. This difference is the "adjusted gross		\$
5.	Indicate below the amount of the adjusted gross proce each of the purposes shown. If the amount for any purposes to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	ourpose is not known, furnish an estimate and e payments listed must equal the adjusted gross		
			Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees	Г	¬\$	\$
	Purchase of real estate			
	Purchase rental or leasing and installation of machin	nerv		
	and equipment			
	Construction or leasing of plant buildings and facility	ties	] <b>\$</b>	. 🗆 \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	or securities of another	٦\$	\$ 11,980,000.0
	Repayment of indebtedness		_ · ¬\$	_
	Working capital			
	Other (specify):			
	Other (specify).		J *	
			]\$	\$
	Column Totals		\$ 0.00	11,980,000.0
	Total Payments Listed (column totals added)		□ \$ <u>_1</u>	1,980,000.00
		D. FEDERAL SIGNATURE	of the state of th	
sig the	e issuer has duly caused this notice to be signed by the unature constitutes an undertaking by the issuer to furnisinformation furnished by the issuer to any non-accret	sh to the U.S. Securities and Exchange Commis dited investor pursuant to paragraph (b)(2) of F	sion, upon writte	en request of its staff,
	11 1	9 -	July 11, 2008	
	SA Pope Asset Fund I, LLC	Hadas Aleger		
	8 (,,,	Fitle of Signer (Print or Type)		
Ho	lis Gieger	Authorized Signatory		

- ATTENTION -

-	E. STATE SIGNATURE		
١.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No <b>⋉</b>

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature	Date
CSA Pope Asset Fund I, LLC	tous Loger	July 11, 2008
Name (Print or Type)	Title (Print or Type)	
Hollis Gieger	Authorized Signatory	

## Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

## 5 4 3 2 l Disqualification under State ULOE Type of security (if yes, attach and aggregate Intend to sell Type of investor and explanation of offering price to non-accredited waiver granted) amount purchased in State offered in state investors in State (Part E-Item 1) (Part C-Item 2) (Part C-Item 1) (Part B-Item 1) Number of Number of Non-Accredited Accredited Yes No Investors Investors Amount Amount Yes No State X LLC Units - \$12 M 37 \$10,200,000 AL X AK ΑZ AR CA CO CTDE DC X 1 \$250,000.00 FL LLC Units - \$12 M \$250,000.0 X LLC Units - \$12 M 1 X $\mathsf{G}\mathsf{A}$ HI ID IL IN IA KS KY LA ME MD MA ΜI MN LLC Units - \$12 M MS X \$250,000.0 X

**APPENDIX** 

. ,		<u> </u>		APP	ENDIX				
1	Intend to non-a investor	to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pur	investor and rehased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors  Amount  Number of Non-Accredited Investors  Amount			Amount	Yes	No
МО									;
МТ									
NE									
NV	,								
NH									<u> </u>
NJ									
NM		_						!	
NY		-							
NC	. ,								
ND						•			
ОН									
OK									
OR									
PA									
RI									
SC									
SD									
TN		×	LLC Units - \$12 M	2	\$300,000.00				x
TX									
UT									
VT									
VA									
WA		,							I
wv									
WI	×		LLC Units - \$12 M	1	\$250,000.00				×

				APP	ENDIX					
1		2	3			5 Disqualification under State ULO				
	to non-a	I to sell accredited as in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)				amount purchased in State			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY										
PR							<u></u>			

